



Docket No.: 4710-0105P  
(PATENT)

*IN THE UNITED STATES PATENT AND TRADEMARK OFFICE*

In re Patent Application of:  
Shoji ICHINOHE

Application No.: 10/752,501

Confirmation No.: 5138

Filed: January 8, 2004

Art Unit: 1712

For: HIGHLY PURE POLYETHERSILICONE

Examiner: PENG

**AMENDMENT IN RESPONSE TO FINAL OFFICE ACTION**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

**INTRODUCTORY COMMENTS**

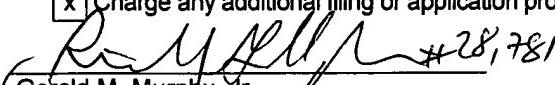
In response to the Office Action dated November 3, 2005, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 3 of this paper.



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AMENDMENT TRANSMITTAL LETTER			Docket No. 4710-0105P	
Application No. 10/752,501-Conf. #5138	Filing Date January 8, 2004	Examiner K. L. Peng	Art Unit 1712	
Applicant(s): Shoji ICHINOHE				
Invention: HIGHLY PURE POLYETHERSILICONE				
<b>MS Amendment</b> <b>Commissioner for Patents</b> <b>P.O. Box 1450</b> <b>Alexandria, VA 22313-1450</b>				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	3	- 20 =		x
Independent Claims	1	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify):				
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>				0.00
<input checked="" type="checkbox"/> Large Entity		<input type="checkbox"/> Small Entity		
<input checked="" type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
 <u>Gerald M. Murphy, Jr.</u> Attorney Reg. No.: 28,977				
Dated: <u>February 3, 2006</u>				
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